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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐Declaration  
Submitted  
With Initial  
Filing

OR

☒Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)Attorney Docket  
Number

22198(2)US

First Named Inventor

BOYD, Robert R.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ARTICULATED ELEMENTS AND METHODS FOR USE

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

12/10/2003

as United States Application Number or PCT International

Application Number

PCT/US2003/039511

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                                     |
|--|---------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|
|  |         |                                     |                          | YES                      | NO                                  |
| PCT/US2003/039511                      | PCT     | 12/10/2003                          | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|  |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

☐

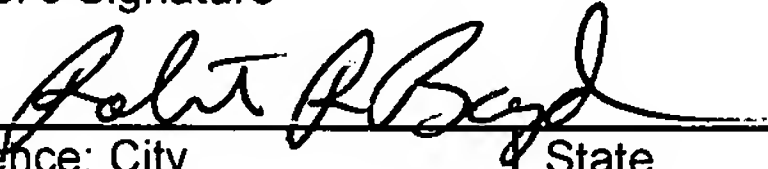
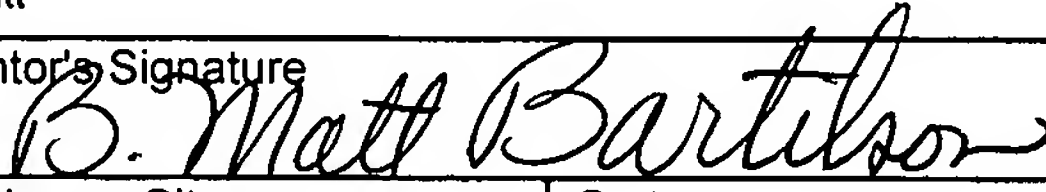
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

|  |  |   |   |  |                 |
|--|--|---|---|--|-----------------|
| Direct all correspondence to:  |  | <input checked="checked" type="checkbox"/> The address associated with Customer Number: | 24116   | OR <input type="checkbox"/> Correspondence address below |                 |
| Name   |  |   |   |  |                 |
| Address  |  |   |   |  |                 |
| City   |  |   | State   |  | ZIP             |
| Country  |  | Telephone   |   | Email  |                 |
| <small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small> |  |   |   |  |                 |
| <b>NAME OF SOLE OR FIRST INVENTOR:</b>   |  |   | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                 |
| Given Name (first and middle [if any])   |  |   | Family Name or Surname  |  |                 |
| Robert R.  |  |   | Boyd  |  |                 |
| Inventor's Signature<br>  |  |   |   |  | Date<br>8-9-05  |
| Residence: City  |  | State   |   | Country  | Citizenship     |
| Jacksonville   |  | Florida   |   | US   | US              |
| Mailing Address<br>3869 Cricket Cove Road East   |  |   |   |  |                 |
| City   |  | State   |   | Zip  | Country         |
| Jacksonville   |  | Florida   |   | 32254  | US              |
| <b>NAME OF SECOND INVENTOR:</b>  |  |   | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                 |
| Given Name (first and middle [if any])   |  |   | Family Name or Surname  |  |                 |
| B. Matt  |  |   | Bartilson   |  |                 |
| Inventor's Signature<br>  |  |   |   |  | Date<br>10/1/05 |
| Residence: City  |  | State   |   | Country  | Citizenship     |
| Hilliard   |  | Ohio  |   | US   | US              |
| Mailing Address<br>4010 Carlton Court  |  |   |   |  |                 |
| City   |  | State   |   | Zip  | Country         |
| Hilliard   |  | Ohio  |   | 43026  | US              |
| <input checked="checked" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>5</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.  |  |   |   |  |                 |

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 1 of 5

|   |               |   |                        |
|---|---------------|---|------------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                        |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                        |
| William T.  |               | Hanna   |                        |
| Inventor's Signature <i>William T Hanna</i>       |               |   | Date <i>12-7-05</i>    |
| Gahanna<br>Residence: City                        | Ohio<br>State | US<br>Country   | US<br>Citizenship      |
| 841 Nob Hill Court                                |               |   |                        |
| Mailing Address                                   |               |   |                        |
| Gahanna<br>City                                   | Ohio<br>State | 43230<br>Zip  | US<br>Country          |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                        |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                        |
| Lynn  |               | Faulkner  |                        |
| Inventor's Signature <i>Lynn S. Faulkner</i>      |               |   | Date <i>06/13/2005</i> |
| Westerville<br>Residence: City                    | Ohio<br>State | US<br>Country   | US<br>Citizenship      |
| 410 Six Pence Circle                              |               |   |                        |
| Mailing Address                                   |               |   |                        |
| Westerville<br>City                               | Ohio<br>State | 43081-5709<br>Zip   | US<br>Country          |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                        |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                        |
| Thomas D.   |               | Haubert   |                        |
| Inventor's Signature <i>Thomas D. Haubert</i>     |               |   | Date <i>6/22/05</i>    |
| Columbus<br>Residence: City                       | Ohio<br>State | US<br>Country   | US<br>Citizenship      |
| 274 Winthrop Road                                 |               |   |                        |
| Mailing Address                                   |               |   |                        |
| Columbus<br>City                                  | Ohio<br>State | 43214<br>Zip  | US<br>Country          |

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 2 of 5

|  |               |   |                   |
|--|---------------|---|-------------------|
| <b>Name of Additional Joint Inventor, if any:</b>  |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))             |               | Family Name or Surname  |                   |
| C. Michael   |               | Gegenheimer   |                   |
| Inventor's Signature <i>C. Michael Gegenheimer</i> |               | Date <i>June 23, 2005</i>   |                   |
| Columbus<br>Residence: City                        | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 1304 Norwell Drive                                 |               |   |                   |
| Mailing Address                                    |               |   |                   |
| Columbus<br>City                                   | Ohio<br>State | 43220<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b>  |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))             |               | Family Name or Surname  |                   |
| Holly A.   |               | Stein   |                   |
| Inventor's Signature <i>Holly A. Stein</i>         |               | Date <i>23 June 05</i>  |                   |
| Columbus<br>Residence: City                        | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 616 West 2nd Avenue                                |               |   |                   |
| Mailing Address                                    |               |   |                   |
| Columbus<br>City                                   | Ohio<br>State | 43201<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b>  |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))             |               | Family Name or Surname  |                   |
| Jean E.  |               | Schelhorn   |                   |
| Inventor's Signature <i>Jean E. Schelhorn</i>      |               | Date <i>6/23/05</i>   |                   |
| Granville<br>Residence: City                       | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 108 Edgewood Drive                                 |               |   |                   |
| Mailing Address                                    |               |   |                   |
| Granville<br>City                                  | Ohio<br>State | 43023<br>Zip  | US<br>Country     |

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 3 of 5

|   |               |   |                   |
|---|---------------|---|-------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| James B.  |               | Gleeson   |                   |
| Inventor's Signature <i>James B. Gleeson</i>      |               | Date <i>6/23/05</i>   |                   |
| Columbus<br>Residence: City                       | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 1193 Westwood Avenue<br>Mailing Address           |               |   |                   |
| Columbus<br>City                                  | Ohio<br>State | 43212<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Mary  |               | Hoffman Pancake   |                   |
| Inventor's Signature <i>Mary Hoffman Pancake</i>  |               | Date <i>6/16/05</i>   |                   |
| Gahanna<br>Residence: City                        | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 1052 Ashmead Drive<br>Mailing Address             |               |   |                   |
| Gahanna<br>City                                   | Ohio<br>State | 43230<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Brian C.  |               | Kelley  |                   |
| Inventor's Signature <i>Brian C. Kelley</i>       |               | Date <i>6/17/05</i>   |                   |
| Pataskala<br>Residence: City                      | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 4633 Headley's Mill Road<br>Mailing Address       |               |   |                   |
| Pataskala<br>City                                 | Ohio<br>State | 43062<br>Zip  | US<br>Country     |

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Supplemental SheetPage 4 of 5

|   |               |   |                   |
|---|---------------|---|-------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Roger W.  |               | Smith   |                   |
| Inventor's Signature <i>Roger W. Smith</i>        |               | Date <i>06/15/2005</i>  |                   |
| Grove City<br>Residence: City                     | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 4351 Harrisburg Pike<br><br>Mailing Address       |               |   |                   |
| Grove City<br>City                                | Ohio<br>State | 43123<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Kevin M.  |               | Taylor  |                   |
| Inventor's Signature <i>Kevin M. Taylor</i>       |               | Date <i>6/23/05</i>   |                   |
| Upper Arlington<br>Residence: City                | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 1835 Glenn Avenue<br><br>Mailing Address          |               |   |                   |
| Columbus<br>City                                  | Ohio<br>State | 43212<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Dov S.  |               | Rosenberg   |                   |
| Inventor's Signature <i>Dov Rosenberg</i>         |               | Date <i>6/27/05</i>   |                   |
| Cincinnati<br>Residence: City                     | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 6204 Meyers Drive<br><br>Mailing Address          |               |   |                   |
| Cincinnati<br>City                                | Ohio<br>State | 45215<br>Zip  | US<br>Country     |

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Supplemental SheetPage 5 of 5

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|---|---------------|---|-------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
| Wayne L.  |               | Poll  |                   |
| Inventor's Signature<br><i>Wayne L. Poll</i>      |               |   | Date<br>12-19-05  |
| New Albany<br>Residence: City                     | Ohio<br>State | US<br>Country   | US<br>Citizenship |
| 7609 Lambton Park Road                            |               |   |                   |
| Mailing Address                                   |               |   |                   |
| New Albany<br>City                                | Ohio<br>State | 43054<br>Zip  | US<br>Country     |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
|   |               |   |                   |
| Inventor's Signature                              |               |   | Date              |
| Residence: City                                   | State         | Country   | Citizenship       |
| Mailing Address                                   |               |   |                   |
| City  | State         | Zip   | Country           |
| <b>Name of Additional Joint Inventor, if any:</b> |               | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                   |
| Given Name (first and middle (if any))            |               | Family Name or Surname  |                   |
|   |               |   |                   |
| Inventor's Signature                              |               |   | Date              |
| Residence: City                                   | State         | Country   | Citizenship       |
| Mailing Address                                   |               |   |                   |
| City  | State         | Zip   | Country           |

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